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Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA0000000023
Phone : (850) 222-1092
Fax Number : (850) 222-9428

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JRH Biosciences, Inc.

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9/24

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. IRH BIOSCIENCES, INC.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Delaware
(State or country under the law of which it is incorporated)
3. 48-1154290
(FEI number, if applicable)
4. 08/23/1994
(Date of incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. 02/14/2003
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 13804 West 107th Street, Lenexa, KS 66125
(Principal office address)
same
(Current mailing address)
8. To manufacture and sell cell culture media and other products.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: c/o C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

BY: [Signature], John J. Linnihan, Asst. VP.
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and business addresses of officers and/or directors: **SEE ATTACHMENT**

A. DIRECTORS

Chairman: Brian McNamee

Address: 13804 West 107th Street

Lenexa, KS 66125

Vice Chairman: _____

Address: _____

Director: Antoni Cipa

Address: 13804 West 107th Street

Lenexa, KS 66125

Director: Thomas Giarla

Address: 13804 West 107th Street

Lenexa, KS 66125

B. OFFICERS

SEE ATTACHMENT

President: Thomas Giarla

Address: 13804 West 107th Street

Lenexa, KS 66125

Vice President: _____

Address: _____

Secretary: Peter Turvey

Address: 13804 West 107th Street Lenexa, KS 66125

Treasurer: Antoni Cipa

Address: 13804 West 107th Street Lenexa, KS 66125

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Thomas G. Rank

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Thomas Giarla, President

(Typed or printed name and capacity of person signing application)

Delaware

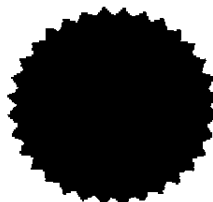
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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JRH BIOSCIENCES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF SEPTEMBER, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 2642286

030603917

DATE: 09-19-03